

## Application or Docket Number

09/897574

207  
2



-7-05 (Column 1)

(Column 2)

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE P.C.		
TOTAL CLAIMS	14 minus 20 =	• 
INDEPENDENT CLAIMS	6 minus 6 =	• 
MULTIPLE DEPENDENT CLAIM PRESENT		

- If the difference in column 1 is less than zero, enter "0" in column 2

RATE	FEE
TOTAL	

RATE	FEE
	790.00
	—
	—
	—
TOTAL	790.00

(Column 1)

(Column 2)

(Column 3)

**SMALL ENTITY**

**OR**

**OTHER THAN  
SMALL ENTITY**

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
	Total	* 14	Minus	** 14	=
Independent	* 6	Minus	*** 6	=	0

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDITIONAL FEE
25.00	
100.00	
180.00	

RATE	ADDITIONAL FEE
50.00	
200.00	
360.00	

AMENDMENT B	(Column 1)		(Column 2)		(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
Total	•	Minus	••	=	
Independent	•	Minus	•••	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDITIONAL FEE

OR TOTAL ADDIT. FEE	
RATE	ADDI- TIONAL FEE
OR	
OR	
OR	
OR	

AMENDMENT C	(Column 1)		(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
Total	•	Minus	**	=
Independent	•	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM.				

TOTAL ADDIT. FEE	
RATE	ADDI- TIONAL FEE

	RATE	ADDITIONAL FEE
OR		
OR		
OR		
OR		

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

• If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest-Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875  
(Rev. 10-82)

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